STATE OF CONNECTICUT OFFICE OF THE CHILD ADVOCATE 999 ASYLUM AVENUE, HARTFORD, CONNECTICUT 06105



Testimony of Jamey Bell, Acting Child Advocate, before the Connecticut Sentencing Commission November 29, 2012

I am the newly appointed Child Advocate for the State of Connecticut. C.G.S. § 46a-13l outlines the broad responsibilities of the Office of the Child Advocate including, but not limited to, the evaluation of the delivery of state or state funded services to children, the review of policies, procedures and practices of state agencies providing services to children, and making recommendations for changes in state policies concerning children.

I appreciate the opportunity to testify today in support of changes to the current sentencing system as it relates to individuals serving lengthy sentences for crimes committed prior to age 18. The Office of the Child Advocate (OCA) supports your Juvenile Sentencing Reconsideration Proposal that would allows for a procedure allowing juvenile offenders serving lengthy sentences a meaningful opportunity, after serving a portion of that sentence, to obtain a "second look" and possible release before the end of their original sentences, if they can demonstrate increased maturity and rehabilitation.

Advances in science over the past several years have provided solid evidence that the adolescent brain is not fully developed until far into the twenties, and that the last features of the brain to develop are those that control judgment, decision-making and proper understanding of the consequences of actions.

Already this information has dramatically influenced many of our public policies and practices regarding service delivery to children and youth across many realms including child welfare, education, mental health, medicine, and the judicial system.

The Office of the Child Advocate (OCA), through its unique authority, works closely with all state agencies having responsibility for children and youth to ensure that policies, procedures and practices reflect awareness of this knowledge and serve children and youth in a *developmentally appropriate way*. In particular, OCA has committed extensive time and effort over the past 15 years to ensuring that the Department of Children and Families (DCF), responsible for child protection, children's mental health, juvenile justice and prevention, and the Court Support Services Division (CSSD), responsible for supporting the Judicial Branch's work, incorporate evolving knowledge and best practices into their

Phone (860) 566-2106 • Toll Free (800) 994-0939 • Fax (860) 566-2251

¹ Kendall Powell, Neurodevelopment: How Does the Teenage Brain Work?," *Nature* 442 (24 August 2006): 865-867, available at: http://www.nature.com/nature/journal/v442/n7105/pdf/442865a.pdf. See also, Jay M. Giedd, "The Teen Brain: Insights from Neuroimaging" *Journal of Adolescent Health* 42(2008): 335-343, available at http://brainmind.umin.jp/Jay 2. pdf and Debra Bradley Ruder, "The Teen Brain", *Harvard Magazine*, (Sept-Oct 2008) available at: http://harvardmag.com/pdf/2008/09-pdfs/0908-8.pdf

work with Connecticut's children and families. We have witnessed significant change in policies and practices affecting children because of their receptivity to and incorporation of new/best practices consistent with evolving science, such as maximizing opportunities for infant and child brain development, monitoring developmental milestones and supporting secure attachment to consistent caregivers. CSSD and DCF have reported positive outcomes from statewide prevention and early intervention efforts resulting in fewer numbers of children involved with the court system and decreased delinquency commitments. These and other state systems are likewise incorporating the most recent discoveries and information about brain development in older children, adolescents and young adults, including to inform such new policies as specific and extended support for youth "aging out" of foster care.

However, the Civil Justice Clinic of the Quinnipiac University School of Law reports that Connecticut currently has 267 individuals serving sentences of more than 10 years for offenses committed under the age of 18. Since the suicide death of 16 year old David B. at MYI in 2005, the OCA has worked extensively and collaboratively with the Department of Correction (DOC) at both York Correctional Institution (YCI) and Manson Youth Institution (MYI) to implement changes to the conditions of confinement and rehabilitative programming provided to juvenile offenders. We have advocated for change informed by the understanding of the unique needs of adolescents, and a focus on developing their capacity to live healthy and productive lives upon release through education, vocational and social skill development, mental health and substance abuse services. Over the past 5 years, DOC leadership and prison administrators have welcomed the OCA into their facilities serving the youngest inmates as part of their efforts to achieve safety and security for both inmates and staff, as well as maximize the rehabilitation potential for those in custody. Through this collaboration, we have witnessed firsthand the harsh realities of incarceration for these young people, as well as their potential for positive development through maturation, education, and access to appropriate rehabilitative programming and health services.

One young woman, well known to the OCA through our work within the adult women's prison, was only 17 years old when incarcerated on charges relating to the death of her newborn. Prior to this, "S" was a typical teen, living in a stable intact family. She was an exceptional student, on her way to college in the pursuit of her dreams, faced with an unexpected pregnancy.

She most likely dissociated as some immature and panicked young women do, and hid the pregnancy. She delivered her baby alone and did not seek out medical attention or a safe place to leave her child. She was sentenced at age 18 to serve 18 years for manslaughter. She received her high school diploma at YCI, and has pursued whatever education she can within the facility. After a period of adjustment and fear, she accepted and faced her circumstances and now embraces all the help that is available to her. She hopes to be able to help others when she is released.

Poor judgment, poor impulse control and susceptibility to peer influence are all commonly associated with adolescence. Brain and social research tells us why. It also shows that teenagers have good potential for rehabilitation. These considerations support developing public policy around sentencing which recognizes these differences between juvenile offenders and adult offenders. Therefore the OCA supports your proposed legislative changes entitling juvenile offenders serving lengthy sentences to meaningful review after a portion of their sentence is served, and release for those individuals who can demonstrate that they have matured and rehabilitated.

Thank you for the opportunity to provide testimony.